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		Application Number	09/194,552	\mathcal{F}		
TRANSMIT	TAL	Filing Date	March 23, 1999	\$		
FORM	FORM		Brooks	SE AY	MAY 0 3 2002	Ċ
(to be used for all correspondence at	fter initial filing)	Group Art Unit	1642		0 3	Ī
		Examiner Name	A. Harris		200	
Total Number of Pages in This Sub	mission	Attorney Docket Numbe	r TSRI 481.2		22	Ü
	ENCL	OSURES (check	all that apply)	ř		_
X Fee Attached X Amendment / Reply After Final Affidavits/declaration(s) X Extension of Time Request Express Abandonment Request X Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing Licensin Petition Petition Provisio Change Address Termina Request CD, Nur Remarks	to Convert to a nal Application of Attorney, Revocation of Correspondence I Disclaimer t for Refund Inber of CD(s)	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Repty Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): postcard Appendix I Appendix II			
SIGNATU	URE OF APPLIC	CANT, ATTORNEY, OR A	AGENT			
or Emily Ho	lmes					

Date	4/19/2002	
The same of the sa	CERTIFICATE OF MAIL	ING
I hereby certify that this corresp mail in an envelope addressed	ondence is being deposited with the United States F to: Commissioner for Patents, Washington, DC 202	Postal Service with sufficient postage as first class 31 on this date: 4/19/2002
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Complete if Known			
Application Number	09/194.552	4	
Filing Date	3/23/1999	7	
First Named Inventor	Brooks		
Examiner Name	A. Harris	1	
Group Art Unit	1642	#	
Attorney Docket No.	TSRI 481.2	一	
FEE CALCULATION (continued)			
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METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES				
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Account Number 19-0962	Entity Entity Fee Fee Fee Fee Fee Description	Con Doid			
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Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed: Check Credit card Money Cther	112 920° 112 920° Requesting publication of SIR prior to Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
	115 110 215 55 Extension for reply within first month				
1. BASIC FILING FEE Large Entity Small Entity	116 400 216 200 Extension for reply within second month				
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101 740 201 370 Utility filing fee 106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal				
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)				
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Claims	144 620 244 310 Plant issue fee				
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Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))				
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be				
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$)	Other fee (specify)				
**or number previously paid, if greater: For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110	00.00			

SUBMITTED BY Complete (if applicable)			applicable)		
Name (Print/Type)	Emily Holmes	Registration No. (Attorney/Agent)	40,652	Telephone	(858) 784-2937
Signature	Junit Hilma			Date	4/19/2002

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